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CONFIRMATION NO. 2542

<b>SERIAL NUMBER</b> 10/693,464	<b>FILING OR 371(c) DATE</b> 10/24/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> ZL 0188B
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/658,052 09/09/2003 which is a CIP of 10/438,510 05/15/2003 *ok*  
 which claims benefit of 60/380,376 05/15/2002 *omch*  
 and claims benefit of 60/423,022 11/01/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None mch*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 16	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Mary C. Fitts</i> Examiner's Signature Initials				

## ADDRESS

23367

## TITLE

Cross-pin graft fixation, instruments, and methods

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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